AFFIDAVIT

| Name (party of the First Part): |
|---|
| Utility Connection permit Number: |
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| |
| The party of the First Part, after being first duly sworn upon oath, depose and say that all persons, firms, or corporations who furnished labor or material used directly or indirectly in the prosecution of the work required to be performed by the above Utility Connection Permit between the party of the First Part and Broward County, address 2555 West Copans Road, Pompano Beach, Florida 33069 have been paid in full. |
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| |
| (signed on the following page) |

| thereunto duly authorized. | |
|--|--|
| Corporate Name: | |
| Signature: | |
| Type Name: | |
| Address: | |
| ATTEST (not required if witnessed below) | |
| Corporate Secretary Signature: | (CORPORATE SEAL) (not required if digitally signed by Secretary) |
| Typed Name: | |
| WITNESSES (not required if attested by Secre | etary above) |
| Witness One Signature: | Witness Two Signature: |
| Witness One Typed Name: | Witness Two Typed Name: |
| Witness One Address: | Witness Two Address: |
| ACKNOWLEDGMENT STATE OF FLORIDA COUNTY OF BROWARD | |
| | ed before me, by means of \square physical presence or \square online, the on behalf of, a, who is personally known to me or \square who has |
| produced as identif | fication. Notary Public: |
| | Signature: |
| State of Florida My Commission Expires: Commission Number: | Print Name: (Notary Seal) (not required if digitally signed by Notary) |
| | |

IN WITNESS WHEREOF property owner has caused its corporate name to be hereunto signed by its proper officers

WWS Affidavit Form Corporation Revised: February 6, 2025